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			9' <u>(</u>	S FI		
1	COMPLAINT BY A PRISONER UNDER THE CIVIL RIGHTS ACT, 42 U.S.C §§ 1785					
2	Name ROSENBALM	VINCENT	L	JUN 2 7 2000		
3	(Last)	(First)	(Initial)	NORTHERS U. S. O. W. WIE		
4	Prisoner Number 2069	3 75		PICTON DISTRICT COUNTY OF CALIFO		
5	Institutional Address 2100 NAPAVALLEJO HIGHWAY					
6	NAPA, CALIFORNIA 94558					
7	UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA					
8	L'inscract ROSON RAIMONT					
9	(Enter the full name of plaintiff in this action.) UV 08 3128					
10	vs.		Case No.	ded by the Clerk of Court)		
11	DOCTOR DOUGLAS RO					
12	(SHERIFF) THOMAS ALLMAN) COMPLAINT UNDER THE CIVIL RIGHTS ACT, Title 42 U.S.C § 1983					
13	ED FOULK U.S.C. 28 1915(g)					
14	(Franch Cilia va Cita de Contact (a) in this series					
15	E-filing					
16	[All questions on this complaint form must be answered in order for your action to proceed					
17	I. Exhaustion of Administrative Remedies.					
18	[Note: You must exhaust your administrative remedies before your claim can go					
19	forward. The court will dismiss any unexhausted claims.]					
20	A. Place of present confinement NAPA STATE HOSPIFAI					
21	B. Is there a grievance procedure in this institution?					
22	YES (V)	NO ()				
23	C. Did you present the	facts in your complain	nt for review th	hrough the grievance		
24	procedure?	_				
25	YES()	NO (*)				
26	D. If your answer is YES, list the appeal number and the date and result of the					
27	appeal at each level of review. If you did not pursue a certain level of appeal,					
28	explain why. Oid NO+ HAPPEN in this					
			INSti	tution		
	COMPLAINT	1				

Is 808-80

1	1. Informal appeal JUDGES IN MENDOCINO			
2		COUNTY REFUSED ME THE OPPORTUNITY		
3		to PUT ROSOFF ON THE STAND 12/21/06		
4		2. First formal level State MEDICAL BOARD		
5		COMPLAINT ABOUT SPRING 2007		
6				
7		3. Second formal level (Appeal) First District		
8	,	COURT OF Appeal Presudicial error		
9		colong reviewed by supreme court 5/08		
10		4. Third formal level SUPREME COURT OF CALIFORNIA		
11		Appeal PENDING (SPRING 2008)		
12				
13	E.	Is the last level to which you appealed the highest level of appeal available to		
14		you?		
15		YES (V) NO ()		
16	F.	If you did not present your claim for review through the grievance procedure,		
17		BECAUSE +HIS CLAIM DID NOT HAPPEN		
18	At	NAPA STATE HOSPITALIT happened		
19	IN MENDOCINO COUNTY			
20	II. Parties	3.		
21	A.	Write your name and your present address. Do the same for additional plaintiffs,		
22		if any.		
23	VINCENT KOSENBALM			
24	2100 NAPA VAILESO HIGHWAY			
25	$-\mathcal{N}^{\mathcal{P}_{0}}$	PA, CALIFORNIA 94558		
26	В.	Write the full name of each defendant, his or her official position, and his or her		
27		place of employment.		
28	DOCTOR	R ROSOFF-DOCTOR MENDOCINO MENTAL HEALTH		
	COMPLAIN	г - 2 -		

HOSDITA III. Statement of Claim. State here as briefly as possible the facts of your case. Be sure to describe how each defendant is involved and to include dates, when possible. Do not give any legal arguments or cite any cases or statutes. If you have more than one claim, each claim should be set forth in a separate numbered paragraph. WROTE A REPORT FOR MENDOCINO IV. Relief. Your complaint cannot go forward unless you request specific relief. State briefly exactly what you want the court to do for you. Make no legal arguments; cite no cases or statutes.

COMPLAINT

1	RESTRAINING ORDER AGAINST MENDOCINO POLICE				
2	HELP with RE-TRAINING (EDUCATION)				
3	I ASK FOR A SUMMARY JUDGMENT OF				
4	95 MILLION POLLARS FOR DAMAGES!				
5	I declare under penalty of perjury that the foregoing is true and correct.				
6					
7	Signed this $\underline{\hspace{1cm}}^*$ day of $\underline{\hspace{1cm}}$ $\underline{\hspace{1cm}}$ $\underline{\hspace{1cm}}$ $\underline{\hspace{1cm}}$ day of $\underline{\hspace{1cm}}$				
8	Vincent Rose Jalin				
9	- Micent 1202 May				
10	(Plaintiff's signature)				
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	COMPLAINT - 4 -				